FORM D

03036152

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

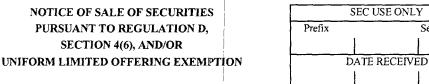
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OMB APPI	ROVAL
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OMB No 5-0076 Expires: May 31, 2005

Estimated average burden hours per response......16.00

Serial



Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Series E Preferred Stock Financing – Second Round	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] UL Type of Filing: [X] New Filing [] Amendment	OE EWED
A. BASIC IDENTIFICATION DATA	1 1 000 - 000 VE
Enter the information requested about the issuer	/ / AC 1 3 1 5003 > >
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) NextNet Wireless, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 9555 James Avenue South, Bloomington, MN 55431	Telephone Number (Including Area Code) (952) 929-4008
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from	Telephone Number (Including Area Code)
Executive Offices)	PROCESSED
Brief Description of Business	
Developer of broadband wirelesss access systems	NOV 03 2003
Type of Business Organization	THOMSON
[X] corporation [] limited partnership, already formed [] other (please specify): [] business trust [] limited partnership, to be formed	FINANCIA
Actual or Estimated Date of Incorporation or Organization:	Month Year [0 1] [9 8] [X] Actual [] Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) [D]E]

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuer. [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Kelnhofer, Guy Business or Residence Address (Number and Street, City, State, Zip Code) 9555 James Avenue South, Bloomington, MN 55431 [] Promoter [] Beneficial Owner [X] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Costello, Joseph Business or Residence Address (Number and Street, City, State, Zip Code) 9555 James Avenue South, Bloomington, MN 55431 [] Promoter [X] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Kelman, Vladimir Business or Residence Address (Number and Street, City, State, Zip Code) 9555 James Avenue South, Bloomington, MN 55431 [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Doll, Dixon Business or Residence Address (Number and Street, City, State, Zip Code) 9555 James Avenue South, Bloomington, MN 55431 [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Schiffman, Barry Business or Residence Address (Number and Street, City, State, Zip Code) 9555 James Avenue South, Bloomington, MN 55431 [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Marcinek, Brian Business or Residence Address (Number and Street, City, State, Zip Code) 2300 Carillon Point, Kirkland, WA 98033 [] Promoter [] Beneficial Owner [] Executive Officer [X] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Kauser, Nicolas Business or Residence Address (Number and Street, City, State, Zip Code) 2300 Carillon Point, Kirkland, WA 98033 [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) **Doll Capital** Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Sand Hill Road, Building 3, Suite 225, Menlo Park, CA 94025

Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	
Full Name (Last name first, if a JAFCO America Ventures	individual)					
	`		le)			
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	
Full Name (Last name first, if Muse, Ralph	individual)					<u> </u>
Full Name (Last name first, if individual) JAFCO America Ventures Business or Residence Address (Number and Street, City, State, Zip Code) 505 Hamilton Avenue, Suite 310, Palo Alto, CA 94301 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Muse, Ralph Business or Residence Address (Number and Street, City, State, Zip Code) 16 Sarah Nash Court, Dallas, TX 75225 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) Mills, Wayne Business or Residence Address (Number and Street, City, State, Zip Code) 5020 Blake Road S., Edina, MN 55436 Check Box(es) that Apply: [] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner Full Name (Last name first, if individual) COM Holdings, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1133 21* St. NW, 8th Floor, Washington D.C. 20036						
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	
,	individual)					
		reet, City, State, Zip Cod	le)			
Check Box(es) that Apply:	[] Promoter	[X] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner	
	individual)					
_			le)			
	(1	Use blank sheet, or copy	and use additional copi	es of this shee	t, as necessary.)	

													
				B. INF	ORMAT	ION ABC	UT OFFI	ERING					
1. Has the issuer sold	, or does the	issuer inter	nd to sell, to	non-accre	lited investo	ors in this of	fering?		•••••••••••				Yes No . [] [X]
				Answer also	in Append	ix, Column	2, if filing u	ınder ULOF	Ē.				
2. What is the minim	um investm	ent that will	l be accepted	d from any	individual?.			ļ					\$ N/A
3. Does the offering p	permit joint	ownership o	of a single u	nit?		······							Yes No [X] []
 Enter the informate solicitation of pure registered with the of such a broker or 	hasers in co SEC and/or	nnection wi	ith sales of s e or states, l	securities in ist the name	the offering of the brok	g. If a perso er or dealer	n to be liste . If more th	d is an asso	ciated perso	n or agent o	of a broker of	or dealer	
Full Name (Last name None	first, if indi	vidual)											
Business or Residence	Address (N	umber and	Street, City	, State, Zip	Code)								
Name of Associated B	roker or Dea	aler											
States in Which Person (Check "All States												[]	All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] {OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (Last name			[11.7]		[0.7]	[]	[]	1	(,,,)	[]		[, 1,	
D	A 11 (XI	1	Street City	Ctata Zia	0-4->							·	
Business or Residence	Address (N	umber and	Street, City,	, State, Zip	Code)			ļ					
Name of Associated B	roker or Dea	aler											
States in Which Person (Check "All States												[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (Last name	first, if indi	vidual)											
Business or Residence	Address (N	umber and	Street, City,	, State, Zip	Code)					· <u> </u>	· ·— · ·		
Name of Associated B	roker or Dea	aler											·- <u>-</u> -
States in Which Person (Check "All States												[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt 4,999,998.18 2,856,489.39** Equity [] Common [X Preferred 0* Convertible Securities (including warrants) Partnership Interests Other (Specify) \$ \$ 4,999,998.18 \$ 2,856,489.39 *Each purchaser of Series E Preferred Stock also received a warrant to purchase 50% more shares of Series E Preferred Stock. **Amount already sold includes \$1,374,769.74 principal amount due on outstanding notes that were converted into shares of Series E Preferred Stock. Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors \$ 2,856,489.39** Accredited Investors Non-accredited Investors \$ Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C--Question 1. Type of Type of Offering Security Sold Rule 505 Regulation A Rule 504 Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future

Dollar Amount contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees [] Printing and Engraving Costs [] 35,000 Legal Fees [X] Accounting Fees [] Engineering Fees [] Sales Commissions (Specify finders' fees separately) [] Other Expenses (identify) [] 35,000 [X]

	C. OFFERING PRICE, NUMBER O	F INVESTO	RS, EXPENSE	S ANI	D USE	OF	PROCEEDS			
	b. Enter the difference between the aggregate offering price given in furnished in response to Part C-Question 4.a. This difference is the									\$ <u>2,821,489.39</u>
	Indicate below the amount of the adjusted gross proceeds to the issu. If the amount for any purpose is not known, furnish an estimate a payments listed must equal the adjusted gross proceeds to the issuer of the instance o	ind check the b	ox to the left of t	he esti	mate.	The to				
							Payments to Officers, Directors & Affiliates			Payments to Others
	Salaries and fees				[]	\$_	Anniales	[]	\$	
	Purchase of real estate				[]	\$_		[]	\$	
	Purchase, rental or leasing and installation of machinery and equ	ıipment	•••••••		[]	\$ _		[]	\$	
	Construction or leasing of plant buildings and facilities				[]	\$_		[]	\$	
	Acquisition of other businesses (including the value of securities used in exchange for the assets or securities of another issuer pu				[]	\$_		[]	\$	
	Repayment of indebtedness				[]	\$_	1,374,769.74	[]	\$	
	Working capital				[]	\$_	·	[X]	\$	1,446,719.65
	Other (specify):									o
						\$		-	\$	
	Column Totals				[]	s _	1,374,769.74	[X]	\$	1,446,719.65
	Total Payments Listed (column totals added)					[X	[] \$ <u>2,821,</u>	489.39	_	
Co	nversion of outstanding notes as described in Question 1 of Part C	above.								
	D. F	EDERAL SI	GNATURE							
nd	issuer has duly caused this notice to be signed by the undersigned duly ertaking by the issuer to furnish to the U.S. Securities and Exchange Caccredited investor pursuant to paragraph (b)(2) of Rule 502.	y authorized per ommission, upo	rson. If this notice on written request c	is filed of its st	under aff, the	Rule 5 inforn	05, the following nation furnished	g signatu by the is	re co suer t	nstitutes an o any
	er (Print or Type) tNet Wireless, Inc.	Signature		上		Dat	e 10-6	27-	<u> </u>)3
lar	ne of Signer (Print or Type)	Title of Sign	er (Print or Type) d Chief Executive				(0)	<u> </u>		
>u;	J. Kelnhofer III	Presidental	d Chief Executive	Ome	er					
				İ						
		ATTENT	ION							
	Intentional misstatements or omissions of	fact constitut	e federal crimin	al vio	lations	s. (Sé	e 18 U.S.C. 10	001.)		

	E. STATE SI	GNATURE	
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of such rule?		
	See Appendix, Column	5, for state response.	
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of times as required by state law.	any state in which this	notice is filed, a notice on Form D (17 CFR 239.500) at such
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, up	on written request, infor	rmation furnished by the issuer to offerees.
4.	The undersigned issuer represents that the issuer is familiar with the conditions that of the state in which this notice is filed and understands that the issuer claiming thave been satisfied.		
The	e issuer has read this notification and knows the contents to be true and has duly cause	ed this notice to be signe	ed on its behalf by the undersigned duly authorized person.
Issu	uer (Print or Type) Signature	\overline{C}	Date
Nex	xtNet Wireless, Inc.		10-27-03
Nar	me of Signer (Print or Type)	or Type)	
Gu	y J. Kelnhofer III President a	and Chief Executive Of	fficer

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

		2	3	<u></u>	4	1			5
	Intend to non-ac investors (Part B-	to sell ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1) Series E	Number of	Type of investor and amount purchased in State (Part C-Item 2)				lification ate ULOE , attach ation of granted) -Item 1)
			Preferred Stock	Accredited		Number of Non-Accredited			
State AL	Yes	No		Investors	Amount	Investors	Amount	Yes	No
AK							<u> </u>		
AZ					ļ		-		
AR						<u> </u>	-		
CA		X	\$818,056.62	8	\$818,056.62	0	0		X
CO			3010,000.02		\$616,030.02		-		A
CT						<u></u>			
DE									
DC		X	\$2,038,432.77	1	\$2,038,432.77	0	0		X
FL			,,		1-,000,1020,77				
GA									
HI									
ID									
IL									
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APPENDIX

1	Intend to sell to non-accredited investors in State		Type of security and aggregate offering price offered in state		Type of inv	ised in State		Disqual under Sta (if yes explan waiver	ification ate ULOE , attach ation of granted)
	(Part B	-Item 1)	(Part C-Item 1) Series E	Number of	(Part C-I	Number of		(Part E	-Item 1)
			Preferred Stock	Accredited		Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
OR									
PA									
RI						i			
SC						,			
SD				-					
TN									
TX									
UT	_								
VT									
VA									
WA									
WV									
WI									
WY									
PR									

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